

# **The Division of Mental Retardation and Developmental Disabilities System Breakthrough for Excellence**

## **Preface**

A special note of thanks from the Division and all participants of the System Breakthrough for Excellence is due our two Steering Committee Co-chairs: Mr. Bob Story and Ms. Joann Noll. These folks have provided invaluable insight and leadership throughout this process. We will continue to call upon them as we work through the initiatives and the ongoing commitment to improve our service delivery system.

## **Background**

In the System Breakthrough for Excellence report, the Division accepted all 62 recommendations made by the work groups. Given limited resources, the Division staff, with the approval of the System Breakthrough for Excellence (SBE) Steering Committee, are focused on recommendations which:

1. will improve service delivery system-wide;
2. are doable within the next one to three (1-3) years;
3. support the Department's core values; and
4. are cost effective.

The Division's work is organized into eleven (11) initiatives and related recommendations, followed by the various other recommendations made by the work groups. This progress report is factual and provides specific information and data regarding initiatives and their work in progress.

This Progress Report presents each of the eleven (11) initiatives and provides a status report on each one.

## Progress Report

### **Initiative and Recommendation #1: Individual Budgets for Consumers**

Goal: Persons who can and choose to self-direct their budget have that option.

Progress: Grant obtained (Independence Plus Grant) to pilot self-directed budgets.

Outcome: Independence Plus Grant received in Fall, 2003. The Self-Directed Task force began work on the Independence Plus Grant initiative in December 2003. The taskforce meets monthly. Staff from UMKC, Center for Excellence, and the Missouri Planning Council are taking the lead in organizing grant activities. The Self-Directed Task Force's pilot will allow the use of independent facilitators, support brokers, a revised fiscal intermediary concept, and support families' and consumers' management of their own budgets:

**Person-centered planning facilitators:** self-directed, independent facilitator, or MRDD service coordinator with no gate keeping functions;

**Support broker:** self-directed, independent broker, or MRDD service coordinator with no gate keeping functions

**Fiscal Intermediary:** Current state FI program; independent FI (agency with choice) or national independent FI (Acumen)

**Individualized budgets:** is the total dollar value of the services and supports, as negotiated in the plan of care, and under the control and direction of the program participant.

The following grid represents the current distribution of the choices the potential pilot participants have made:

## Geographical representation of potential pilot participant

### Pilot Participant sequence of activities and timelines

Outcome	Measure	Date
Pilot is supported by Independence Plus grant	Participants contacted and confirmed	October 2004
	Overview and orientation training provided to individual consumers and families	November 2004
	Develop person-centered plan, receive fiscal management training	November and December 2004
	Approve the person-centered plan and select Support Broker	January 2005
	Individual consumers or families select fiscal management service	March 2005
	Recruit, hire, train and develop back-up supports	March 2005 and ongoing

#### Participants

6  
2  
6  
3  
2  
2  
1

#### Area

Kansas City Regional Center  
Albany regional center  
St. Louis Regional Center  
Central Missouri Regional Center  
Hannibal/Kirksville Regional Center  
Rolla Regional Center  
Joplin Regional Center

## Initiative and Recommendation #2: Statewide Rollout of System of Care Model

### Goals:

1. "System of Care" service delivery model that unites planning and funding from all child serving agencies.
2. The Department will fund a feasibility study and develop an implementation and evaluation plan to assist Missouri in designing and developing a comprehensive system of community-based services and supports for children with dual diagnoses.

### Progress:

1. The Division of MRDD staff participate at every level in the system, including serving on the Statewide Advisory Group.
2. The Department applied for a Community-Based Treatment Alternatives for Children (CTAC) grant from Center for Medicare and Medicaid Services. Grant received.

### Outcome:

1. The Department of Mental Health's Comprehensive Psychiatric Services Division provides leadership to the State of Missouri's comprehensive children's mental health services system (or "System of Care").

Outcome	Measure	Date
MRDD fully participates and supports the DMH's development of the comprehensive children's mental health services plan (or System of Care).	MRDD will have representatives on the Stakeholder Advisory Committee, Comprehensive Management Team and workgroups	Completed August 2004
	MRDD participates in local System of Care sites in these counties: Jackson, Adair, Butler, Jefferson, St. Louis City/County, Greene, Stone, Taney, Christian, Lawrence, Barry, St. Charles	Ongoing
	MRDD participates in Quality Service Review	August 2004 and ongoing

	<p>training and evaluations at local System of Care sites. Staff, as well as Parent Policy Partners, are trained and assist with evaluations.</p> <p>(5 staff and 2 Parent Policy Partners are currently trained and conducting evaluations.)</p>	
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Outcome:

2. Grant received.

Outcome	Measure	Date
DMH received grant from Center for Medicaid and Medicare Services.	Completion of study by national consultant with recommendations for expanding funding options.	Completed 2003-2004
	Voluntary Placement Agreement, used in conjunction with Children's Division (Department of Social Services), will offer families a short-term, 180-day maximum, option to choose residential services funded through federal IV-E dollars	January 2005
	Creation and implementation of a new waiver under the Medicaid Home and Community-Based Waiver guidelines.	Mid - 2005

<p><b>Initiative and Recommendation #3: Standardize Formula for Size and Composition of Caseloads</b></p>
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Goal: To ensure responsive and responsible support to families and individuals who receive case management services alone or in tandem with other services.

Progress: The Division and Union representatives co-chaired a Management Advisory Team (MAT) on service coordinator caseloads.

Outcome: The MAT met several times and recommendations have been presented to Division and Department Directors (October, 2004).

Outcome	Measure	Date
Standardize size and composition of caseloads	Develop and implement recommendations from Management Advisory Team consisting of regional center staff and representatives from the Service Employees International Union (SEIU).	January 2005
Offer families case management through contracts with SB40 county board agencies.	Intergovernmental agreements allowing SB40 county board agencies to provide case management are in place in Buchanan, Cole, Boone, Pettis/Saline, Cooper, Franklin, Greene, Jasper, Jefferson, Miller, Montgomery, Pike, Platte, St. Francois, St. Louis City.	Ongoing

<p align="center"><b>Initiative and Recommendation #4:</b>  <b>Service Coordinator Competencies and Training</b></p>
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Goal:

1. Case management manual complete and available online.
2. Development of standardized training for case management supervisor staff.

Progress:

1. Management Advisory Team (MAT) completed manual and is meeting periodically to update as needed.
2. Training ongoing statewide for all case management supervisors.

Outcome:

1. See below.

Outcome	Measure	Date
Case management manual.	The manual is complete and online. Regular updates are responsibility of Director of Quality Assurance.	Ongoing (Original manual completed—late 2003)

Outcome:

See below.

[illegible]

Outcome:

2. See below.

Outcome	Measure	Date
Statewide data base (Action Planning Tracking System-APTS) developed and in use	Written procedures and forms	October 2004
	Installation of statewide data base that connects all 11 regional centers	November 2004
	<ul style="list-style-type: none"><li>▪ Training of use of data base for service monitoring function.</li><li>▪ Training of remainder of quality management functions</li></ul>	<ul style="list-style-type: none"><li>▪ December 2004</li><li>▪ Projected completion date: March 31, 2005</li></ul>
Review and trending of data	Reports of trending written by statewide QA team on each quality management function that is completed.	<ul style="list-style-type: none"><li>▪ Projected date for service monitoring: February 2005</li><li>▪ For remaining functions: May 2005</li></ul>



## **Initiative and Recommendation #5: Stabilization Units**

### Goal:

1. Development of a stabilization unit to address behavioral issues for some adolescents in a therapeutic environment. Goal is to stabilize the person for a successful transition back to community as agreed upon by family member or guardian.
2. Development of a stabilization unit for adults at a habilitation center(s) to provide supports to regional centers and community providers by establishment of a short-term stabilization unit.
3. Collaborate with other Divisions on crisis intervention services and stabilization units for adolescents and adults with dual diagnoses.

### Progress:

1. According to the Division's policy on admissions to habilitation centers, all admissions are considered short term (30, 60 or 90 days) unless the person is in need of a continued level of service available only at the habilitation center. The goal for any admission is to stabilize the person's behaviors and expedite the return to home.
2. Same as #1 above.
3. Discussions ongoing with Division of CPS and their providers regarding possible collaboration. MRDD Director began preliminary discussions with Coalition of Community Mental Health Centers membership on October 13, 2004 regarding consultation to Division and providers on unnecessary admissions to habilitation centers.

### Outcome:

#### 1&2. Admissions and Discharges to Habilitation Centers

Outcome	Measure	Date
Development of evaluation tool of "Division Directive #4.040 Referrals and discharges To and From State Operated Habilitation Centers" as noted in the previous paragraph.	Evaluation tool completed.	August 2004
	Conduct monthly evaluations.	First report completed September 10 2004.

### 3. Crisis intervention and Respite

Outcome	Measure	Date
Increase the Division's resources for localized, crisis intervention and respite	Utilization of existing housing on St. Louis campus with joint responsibilities by the Division of Comprehensive Psychiatric Services and Mental Retardation/Developmental Disabilities	Ongoing
	Development of non state-operated small group home for adolescents with dual diagnoses of mental illness and developmental disabilities	January 2005
MAT formed to identify services available to help stabilize persons with co-occurring disorders in the community.	MAT Report with timeline for implementation.	July, 2005
Procedures and protocols developed and trained to for obtaining services from CMHCs	Number of persons stabilized in the community with support from CMHCs	

<p><b>Initiative and Recommendation #6: Access to Information in Easy to Read Format, through the Internet</b></p>
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Goal:

1. Information on providers to be posted on DMH web site.
2. Information on abuse/neglect and grievances posted on DMH web site.
3. Use [www.communityconnection.org](http://www.communityconnection.org) web site (hosted by University Extension Service) to provide information on providers and services available in community.

Progress:

1. Division of MRDD staff working with Department of Health and Senior Services staff regarding possibilities of posting information on web site.
2. DHSS received a quality assurance/quality improvement grant, where MRDD is a partner, which would facilitate this work.
3. Division is working intensively with University extension staff to make revisions to web site to make it more user friendly and easier to access. All DMRDD facilities are presently on the web site and providers have been advised of the availability and functionality.

Outcome:

1. See below.

Outcome	Measure	Date
Information on licensure and certification of providers to be posted on DMH web site.	Investigate Department of Health and Senior Services operation of website which posts facility inspection results.	December 2004

Outcome:

2. See below

Outcome	Measure	Date
Participate in CMS QA/QI grant	Grant awarded to the Department of Health and Senior Services, Section of Senior Services. The Division of MRDD is one of the partners in this grant as well as other state agencies that administer Home and Community-Based Waiver programs	October 1, 2003, through September 30, 2006.

	and the state Medicaid Agency.	
Identify the information systems currently in use or being developed by various state agencies	The inter-agency group viewed a presentation of the Division of Vocation Rehabilitation automated incident reporting system and collected information from the Center for Medicare and Medicaid Services (CMS) on Quality Frameworks, the HCBS Quality Workbook, the Home and Community-Based Services Participant Survey, and best practices	June 2004
Evaluate the commonalities and variances in each agency's information system.	List of quality indicators that CMS will look for and those that are common to all agencies administering waivers. The information technicians have met to develop a common data dictionary.	November 2004

Outcome:

3. See below.

Outcome	Measure	Date
The Division will participate by providing links to the Community Connection web-site to serve as information to families regarding service options.	Hot-link from DMH's web-site to Community Connections.	Completed October 2004
	Division staff encourage providers to use Community Connections, <a href="http://www.communityconnection.or">www.communityconnection.or</a>	Ongoing through December 2004

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**Initiative and Recommendation #7: Direct Care Worker  
Competencies and Training**

Goal:

1. Implementation of "Workplace Improvement" recommendations (i.e., standardized training package for direct care staff and supervisors).
2. Apply for "Community Direct Care Worker Grant Application".

Progress:

1. Division proposes to create a competency-based system for direct care staff, case management staff and supervisory staff.
2. Division, in collaboration with University of Missouri-Kansas City staff, applied for grant. Funding was not received. Other avenues being discussed.

Outcome:

1&2.

Outcome	Measure	Date
Curriculum for direct support professionals	Convene workgroup with volunteers including NW Missouri county board agency, University of Missouri-Kansas City, IHD, and other stakeholders, Division staff	December 2005

### **Initiative and Recommendation #8: Partners in Employment Project**

Goal: Development and implementation of pilots on employment opportunities for persons with developmental disabilities.

Progress: The Division is working on collaboration models, both in our facilities and with community providers, on maintaining employment, as well as competitive employment models.

Outcome:  
See below.

Outcome	Measure	Date
Offer employment options at regional centers and habilitation centers.	Track consumers employed at Hannibal and Kirksville regional centers.	Ongoing
	6 consumers employed at HRC and KRC combined.	September 2004
Collaboration with SB 40 Board (Lawrence Co)	Co-funded an employment coordinator position	Ongoing

## Initiative and Recommendation #9: Family and Consumer Support

### Goal:

1. Use of tools available for consumers and parents, such as the Developmental Disabilities Resource Center at UMKC and the Sharing our Strengths Program.
2. Continued use of Parent Policy Partners.

### Progress:

1. The Developmental Disabilities Resource Center (DDRC) serves all Missourians, free of charge, as a source of information on disability related topics and provides connections to community supports. The Division has also worked with the DDRC to produce a packet of information that is now printed and being distributed to all families, which includes information on programs such as the Regional Councils, People First, Sharing Our Strengths, MOAIDD, Partners in Policymaking, and other community resources.
2. The Division of MRDD is collaborating with the Parent Policy Partners to ensure the best use of this resource. They are critical members of our teams in the community.

### Outcome:

1&2: See below:

Outcome	Measure	Date
Develop Standardized Resource Folders	Print 5,000 Folders.	Completed August 2004
	Develop Statewide Distribution Strategy	Completed Sept 30, 2004
	Train Case-managers/Intake Coordinators on Process.	October 2004 through December 2004.
	Begin Distribution.	November 2004.
	Review process and materials quarterly.	February 2005.
Develop and/or Update User-Friendly Materials on Disability and Disability Topics	Develop Fast Facts on 10 Disability	Completed September 30, 2004
	Develop a 1-2 page Fast Fact on	Completed October

	<p>Person-Centered Planning (UMKC and MR/DD staff)</p> <p>Create a statewide service delivery system fast fact</p> <p>Reformat Missouri Development Disabilities Resource Center web-site to be user-friendly and to house new information.</p>	<p>2004</p> <p>Draft will be completed by</p> <p>Completed July 31, 2004.</p>
Define Leadership Opportunities of Consumers and Families	<p>Convene workgroup.</p> <p>Develop a leadership development and collaboration action plan for implementing or piloting.</p>	<p>November 30, 2004.</p> <p>December 31, 2004.</p>
Implement strategies that will enhance the utilization of MODDRC and Sharing our Strengths program by Division of MR/DD staff.	<p>Develop orientation materials and presentations for training.</p> <p>Meet with PPP's, service coordinators and intake coordinators at each Regional Center.</p> <p>Develop and pilot measure of the effectiveness of training programs.</p> <p>Report results to Director with recommendations.</p>	<p>Completed September 30, 2004.</p> <p>Begin process October 14, 2004. Complete by December 15, 2004.</p> <p>Complete by February 28, 2005.</p> <p>Report by March 15, 2005.</p>
Continued use of Parent Policy Partners.	Develop a standardized job description and a menu of job duties.	Ongoing.



**Initiative and Recommendation #10:  
Study Possibilities of Expansion of Crisis System**

Goal: Study possibilities of collaboration with Divisions of CPS and/or ADA on crisis and emergency systems. Also explore options of community-based providers to expand this service on a statewide basis.

Progress: Deputy Division Directors of three Divisions are working together and with providers of all three Divisions to review possibilities of further collaboration and possible expansion.

Outcome: See below

Outcome	Measure	Date
Access to crisis network and assistance for families during times of crisis.	Expansion of ability to respond timely with 24/7 emergency services using other networks that may be available.	June 2005

NOTE: Also see Initiative and Recommendation #5: Stabilization Units.

**Initiative and Recommendation #11:  
Development of Performance Measures**

Goal: Development of performance-based budgeting measures that establishes goals and objectives, outcomes and provides for program evaluation.

Progress: The Division is completing work on the performance measures and collaborating on a Department level with “core” measures that may cross Divisions.

Outcome:

Outcome	Measure	Date
Credible measures reflect progress and areas for attention.	Develop performance measures.	January 2005

**Progress on other recommendations in the System Breakthrough report**

**Segment Specific Recommendation #7  
Modify Service/Support Plan to Include “Futures” Section**

Goal:

Modify service plan to incorporate “future” section that forecasts and plans for the long term. Develop a service plan (personal plan) that includes a section for future or long range needs which enables self-determination and flexible planning based on the individual’s “lifestyle needs” rather than a “menu” or available programs or services.

Progress: See Below.

Outcome	Measure	Date
Person-Centered Planning guidelines focus and include “future” sections.	Person-Centered Planning guidelines now reflect workgroup recommendations: forecast probable, future needs with holistic outlook and funding.	Completed October 2004

## **SPECIAL ISSUES**

This portion of the Progress Report will address the Special Issues included as part of the original System Breakthrough for Excellence Report.

### **1. Caseload Growth Funds**

	General Revenue	Federal Matching \$\$	TOTAL
FY05 Request	\$ 4,132,011	\$ 6,525,744	\$ 10,657,755
FY05 Appropriated	\$ 4,132,011	\$ 6,525,744	\$ 10,657,755
 FY06 Draft Request	 \$ 6,833,122	 \$11,009,387	 \$ 17,842,509

Caseload growth funds are used to address the growing number of Medicaid eligible consumers on waiting lists for services.

### **2. Community Support Waiver**

The newest waiver, the Community Support waiver, is in place.

In addition, the current waivers are amended to allow family members to be paid for providing personal assistant services to their loved one.

### **3. Waiting List**

Caseload growth funds are being used to address the waiting list. Waiting lists are reported monthly, posted on the Department's web site, and provided to the Mental Health Commission.

### **4. Structure of the Division's Service Delivery System**

The Division remains committed to continue to support all choices of residence for persons with developmental disabilities and their families. The Division's Five-Year Plan for Habilitation Centers and transition plans is available on the DMH web-site at [www.dmh.mo.gov](http://www.dmh.mo.gov).

### **5. Reaching out to all Consumer Demographic Groups**

University of Missouri-Kansas City, Institute for Human Development staff has conducted a focus group with Latino parents who have children with developmental disabilities to identify the barriers to accessing services. A needs assessment is also being completed with these families. A report is expected **November 2004**.

IHD staff are also conducting focus groups with African-American families and consumers who are currently receiving services from the Division of MRDD. This work is expected to be complete by **December 2004**, with a report to follow

IHD staff has conducted a focus group with Latino parents who have children with developmental disabilities to determine the barriers to accessing services. A needs assessment was also completed with these families, along with agencies that support these families. This information is being compiled and will be distributed to the Division no later than **November 2004**.

IHD staff is working with DMH staff on hosting a focus group with African American families and consumers who are currently receiving services from the Division of MR/DD. Focus groups will be held in St. Louis and in the Sikeston/Poplar Bluff area by **December 2004**.

### **Next Steps**

Post the "Progress Report" on the DMH web-site, [www.dmh.mo.gov](http://www.dmh.mo.gov), and share it via e-mail with interested parties.

Regular review of the "Progress Report" by members of the Steering Committee, Steering Committee co-chairs, and Missouri Planning Council.

Continue with initiatives with prioritization as recommended by the Steering Committee and other stakeholders.